

Department of Human Resources Monroe County, New York

Cheryl Dinolfo County Executive Brayton McK. Connard, SPHR Director

Explanation and Consent Form for Background Investigation

Requirement to Disclose

Applicants must complete this form if they have ever been convicted of a crime or violation other than a minor traffic offense*, they currently have criminal charges pending and/or if they have ever been removed from any type of employment.

Last Name	First Name		Middle	Position Applying for	
Address	City	State	Zip	Telephone	
Date of Birth	Social Security Number		Fo	rmer Names/aliases/a.k.a	
considered and evaluate other things: the truthfuln the offense will have on welfare of individuals or evidence of rehabilitation incomplete statements of	her of the following questions does do individually on its merits. The Coless of the candidate, the seriousne the ability of the person to perform the general public, the age of the n and good conduct, State public in the application or accompanying a withdrawal of a conditional offer of	ounty wil ss of the m such of offender policy, a papers n	I take the folk offense, the s duties, the pro t, the time wh and any other hay result in to	owing factors into consideration pecific duties of the position, the state of the position of property and the state has elapsed since the off pertinent factors. False, mistermination. Pending criminal of	on, amon he bearing safety and fense, and deading of charges, i
Do you currently have an	victed of any violation of law other the y criminal charges pending against poved from any type of employment?	you?	or traffic violat	ion?* Yes ☐ Yes ☐ Yes ☐	No □ No □ No □
Name of Employer: Address: Job Title: Dates of employment: _ Reason(s) for removal fro	mployment Explanation				
	(Attach additional	l pages if	necessary)		

^{*} This question refers to all crimes, violations or offenses in any jurisdiction, including Federal and military offenses, except minor traffic infractions. It also includes Juvenile Offender status convictions. You do not need to include adjudications of Juvenile Delinquency or Youthful Offender status or arrests that did not lead to a conviction.



Department of Human Resources

Monroe County, New York

Cheryl Dinolfo County Executive

Brayton McK. Connard, SPHR *Director*

Conviction and/or Pending Charges Explanation

Name of Offense:			
te of Offense: Name and Location of the Court:			
Penalty or Punishment Imposed (if convicted):			
Year Convicted (if not pending): Age at Time of Offense:			
Name Offense Committed Under (if different than current):			
Explain the circumstances of the offense:			
List all evidence that exists regarding your rehabilitation:			
Explain why your conviction(s) and/or pending charges will not affect your fitness to perform the duties and responsibilities related to the position applied for:			
Explain why your conviction(s) and/or pending charges will not be a hindrance to the County's legitimate interest in protecting property, and the safety and welfare of specific individuals or the general public:			
(Attach additional pages if necessary)			
Certification and Authorization to Access Additional Information			
By my signature below,			
I,, certify that information I provided on this form and any attachments is true, correct and complete.			
I understand that providing false or incomplete information or withholding by omission or intention pertinent information may be cause for disqualification of my application for employment. I understand that Monroe County may contact other individuals to clarify and verifinformation supplied on this form.			
I acknowledge and consent to a State and national criminal background investigation, which will include a fingerprint check, to determine suitability for employment. Failure to meet the standards of the background investigation may result in disqualification.			
I authorize law enforcement agencies, learning institutions (including public and private schools and universities), courts (federal, state and local), motor vehicle records agencies, my past and present employers, the military and other individuals and sources to furnish an and all information on me that is requested by Monroe County.			
I agree that this Authorization form in original, faxed, photocopied or electronic (including electronically signed) form will be valid for an reports that may be requested by or on behalf of Monroe County.			
I acknowledge that I have read, understood and agreed freely to the requirements, consents, authorizations and their respective consequences described on this form.			
Signature Date			